

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		7. If Unit of CA/Agreement Name and/or No. JUL 15 2014
2. Name of Operator Burlington Resources Oil & Gas Company LP		8. Well Name and No. Reese Mesa 8T
3a. Address PO Box 4289, Farmington, NM 87499	3b. Phone No. (include area code) (505) 326-9700	9. API Well No. 30-045-33267
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Surface Unit E (SWNW), 700' FNL & 330' FWL, Sec. 12, T32N, R8W		10. Field and Pool or Exploratory Area Basin Fruitland Coal
		11. Country or Parish, State San Juan, New Mexico

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report <i>BP</i>	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>Rod & Pump Repair</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once Testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

5/16/14 MIRU DWS 28. LD:horse head. LD polish rod. POOH w/rods.

5/19/14 ND WH. NU BOPE. PT BOPE. Test OK. Release tbg hanger. Tbg stuck.

5/20/14 RIH w/rod fishing tools. Fished for 7 days. **5/30/14** Recovered 63' fish (2-K bars & pump). **6/2/14** RU W: Free point & cut off stuck tbg @ 3764', EOT @ 3836'. RD RW.

6/3/14 - 6/12/14 Attempted to retrieve rest of tbg with no luck.

6/14/14 RU WL. RIH w/downhole camera to 3720'. Found hole in 4.5" csg @ 3704' inside production area, POOH. RD WL.

6/17/14 RIH w/59 jts 2 3/8", 4.7#, J-55 tbg set @ 3690' (new setting depth). FN @ 3656'. RIH w/rods, space rods & seat pump. RD RR @ 13:00 hrs on 6/18/14.

OIL CONS. DIV DIST. 3
JUL 24 2014

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

Dollie L. Busse Title **Staff Regulatory Technician**

Signature *Dollie L. Busse* Date **7-14-14**

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

APPROVED FOR RECORD

Approved by _____ Title _____ Date **JUL 21 2014**

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office _____ FARMINGTON FIELD OFFICE BY: *[Signature]*